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								Application or Docket Number				
	PATENT	RD		-1		<b></b>	. !					
	<b></b>	Effectiv	e atober		0	91	315	5, 52	D			
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SM/	ALLEN		OR	OTHER SMALL	
FOR			NUMBE	EXTRA	RA*	E	FEE	1	RATE	FEE		
ВА	SIC FEE							1	385	) P		1770
TOTAL CLAIMS			-	minus :		X\$	9=		ÖR	X\$18=		
	EPENDENT CL	1	<u> </u>					3		OR	×96-	
MULTIPLE DEPENDENT CLAIM PRESENT								5		OR	200=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOT		385	QR	J90=	
CLAIMS AS AMENDED - PART II							OTHER THAN					
C (Column					(Column 2)	(Column 3)	SMA	LLEN	ПТҮ	OR	SMALL	ENTITY
A F		REM. AF	AIMS AINING TER IDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	ΕΠ	NDDI- ONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENTA	Total	*	64	Minus	** 91	=	X\$ 9			OR	X\$18=	
AME	Independent	*	8	Minus	*** 9	=	хү	<u>;=</u>		OR	x86 =	
	FIRST PRESE	NTATIC	ON OF MU	JLTIPLE DEF	PENDENT CLAIR	М	+1116	, <u> </u>		OR		
							+140	TAL		1 1	1290 TOTAL	
·							ADDIT.		<del></del>	OR	ADDIT. FEE	·
	كالمائية والمائية والمائية والمائية		umn 1) AIMS	e Incomerce	(Column 2) HIGHEST	(Column 3)		<del></del>	551		9 K	4001
AMENDMENT B		REM. AF	AINING TER IDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	E TI	DDI- ONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	; <b>##</b>	=	X\$ 9	=   .		OR	X\$18=	
	Independent	*		Minus	***	=	×4.	3		OR	x.86	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
ŀ		-	•		4.45			OR	290			
								TAL EE		OR	TOTAL ADDIT. FEE	
		(Column 3)										
AMENDMENT C		REM.	AIMS AINING TER IDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT	RAT	E TIO	DDI- ONAL EE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	44	E	X\$ 9	=		OR	X\$18=	
	Independent	*		Minus	***	2	хЧ	2		OR	86	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							5				
١.,	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290	
•	K the "Highest Nur	nber Pre	wiously Pa	ud For IN THU	S SPACE is less th	ian 20, enter "20."	ADOIT. F		<u> </u>	OR	TOTAL ADDIT, FEE	
""If the "Highest Number Previously Paid For" (N THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

CLAIMS AS FILED - PART I								SMALL EN	TITY		OTHER	
TO	TAL CLAIMS	-	(Column 1)		(Column 2)			TYPE		OR I	SMALL	
			. 4058					RATE	FEE		RATE	FEE
FOI	<u> </u>		NUMBER FILED		NUMBI	NUMBER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
то	TAL CHARGEA	BLE CLAIMS	9 40 min	us 20=	. 20			X\$ 9=	180	OR	X\$18=	
	EPENDENT CL		4 /)	nus 3 =	2			X40=	80	OR	X80=	
MU	MULTIPLE DEPENDENT CLAIM PRESENT							+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter						olumn 2		TOTAL	615	OR	TOTAL	, .
CLAIMS AS AMENDED - PART II						OTHER THAN					THAN	
		(Column 1)		(Colu		L) (Oblairin O)			ENTITY	OR	SMALL	ENTITY
ENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MENDMENT	Total_	. 9-1_	Minus	** 4	10	= 51 -		X\$.9=	45900	OR	X\$18=	24
AME	Independent	Minus		*** 5	T CLAIM	=		X40=	160.00	OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT					CLAIN	- <u> </u>	1	+135=		OR	+270=	
					•			TOTAL ADDIT. FEE	619.00	OR	TOTAL ADDIT. FEE	
(Column 1)			(Column 2) (Column 3)				ADDII. PEE I	40 Pd		ADDII. FEEI		
		CLAIMS		HIGH	HEST		1		ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	MBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE	-	RATE	TIONAL FEE
NON	Total	• 64	Minus	** • •	91	=	1	X\$ 9=		OR	X\$18=	
AME			I I I I I I I I I I I I I I I I I I I		9			X40=		OR	X80=	أ الم
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		00	+270=	·
								TOTAL		OR	TOTAL	•
,	-						ADDIT. FEE		OR	ADDIT. FEE		
: <u>;</u> .		(Column 1)			mn 2) (Column 3)		·				·	
*AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent •		Minus ***		=		╽╽	X40=	-	OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┚╏					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+135=		OR	+270=	
**	f the "Highest Nu	mber Previously P	aid For IN THI	S SPACE	is less tha	n 20, enter "20.	. ,	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
***If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												